2. G Athauda, A Giubellino, JA Coleman, C Horak, PS Steeg, MJ Lee, J Trepel, J Wimberly, J Sun, A Coxon, TL Burgess, DP Bottaro. c-Met ectodomain shedding rate correlates with malignant potential. Clin Cancer Res. 2006 Jul 15;12(14 Pt 1):4154–4162.

Patent Status: U.S. Patent Application No. 11/663,936 filed March 27, 2007 (HHS Reference No. E–257–2004/0–US–06) and foreign counterparts.

Licensing Status: Available for licensing.

Licensing Contact: Whitney A. Hastings; 301–451–7337; *hastingw@mail.nih.gov.*

Collaborative Research Opportunity: The National Cancer Institute, Medical Oncology Branch, is seeking statements of capability or interest from parties interested in collaborative research to further develop, evaluate, or commercialize this technology. Please contact John D. Hewes, Ph.D. at 301–435–3121 or *hewesj@mail.nih.gov* for more information.

Targeted Recombinant Adenoviral Vectors

Description of Technology: The current invention embodies recombinant adenoviral vectors for use in targeted gene transfer. The method by which these vectors are generated involves no molecular modifications to the adenovirus genome, and allows for the production of vectors targeted specifically to virtually any cell line of choice. Specifically, the vectors are generated by directly linking biotin to the capsid of adenovirus particles. The particles are then treated with streptavidin and subsequently incubated with a biotinylated targeting moiety which is capable of recognizing a specific marker which is expressed on the surface of selected cells. The resulting adenoviral vectors are useful for gene transfer, and can be targeted to virtually any cell type of interest via incubation with a specific targeting moiety.

To date, the inventors have demonstrated that these vectors can be specifically directed to target and infect hematopoietic cell lines which display the c-kit receptor, and are capable of achieving high levels of gene expression in these cell lines. Also, these vectors can be specifically directed to cell surface markers such as CD34, CD44 and others through antibodies directly attached to the biotynilated adenoviral vectors. Such gene transfer represents a gene therapy approach upon which the development of specific therapies against a broad range of diseases may be based, including immunodeficiency diseases, blood cell disorders, and various cancers.

Applications

- Adenovirus with gene plus Biotinylation kit with strepavidin with ligand or antibody for gene of interest
- Biotin linking kits with methods for use

Development Status: Delivery of the biotinylated recombinant adenoviral vector in vitro for use in targeted gene transfer.

Inventors: Jonathan Keller *et al.* (NCI).

Publications

1. JS Smith, JR Keller, NC Lohrey, CS McCauslin, M Ortiz, K Cowan, SE Spence. Redirected infection of directly biotinylated recombinant adenovirus vectors through cell surface receptors and antigens. Proc Natl Acad Sci U S A. 1999 Aug 3;96(16):8855–8860.

2. S Ponnazhagan, G Mahendra, S Kumar, JA Thompson, M Castillas Jr. Conjugate-based targeting of recombinant adeno-associated virus type 2 vectors by using avidin-linked ligands. J Virol. 2002 Dec;76(24):12900–12907.

3. M Brandon Parrott, KE Adams, GT Mercier, H Mok, SK Campos, MA Barry. Metabolically biotinylated adenovirus for cell targeting, ligand screening, and vector purification. Mol Ther. 2003 Oct;8(4):688–700.

Patent Status

- U.S. Patent 6,555,367 issued April 29, 2003 (HHS Reference No. E–193–1997/0–US–03).
- U.S. Patent Application Publication No. US2003/0175973, published September 18, 2003 (HHS Reference No. E–193–1997/0–US–04).

Licensing Status: Available for licensing.

Licensing Contact: Whitney A. Hastings; 301–451–7337; *hastingw@mail.nih.gov.*

Dated: April 27, 2009.

Richard U. Rodriguez,

Director, Division of Technology Development and Transfer, Office of Technology Transfer, National Institutes of Health.

[FR Doc. E9–10300 Filed 5–4–09; 8:45 am]

BILLING CODE 4140–01–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

National Center for Injury Prevention and Control, Initial Review Group, (NCIPC, IRG)

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CDC), announces the following meeting of the aforementioned review group:

Times and Date: 12:30 p.m.–1 p.m., May 20, 2009 (Open). 1 p.m.–3 p.m., May 20, 2009 (Closed).

Place: Teleconference, Toll Free: 888–793–2154.

Participant Passcode: 4424802.

Status: Portions of the meetings will be closed to the public in accordance with provisions set forth in Section 552b(c)(4) and (6), Title 5, U.S.C., and the Determination of the Director, Management Analysis and Services Office, CDC, pursuant to Section 10(d) of Public Law 92–463.

Purpose: This group is charged with providing advice and guidance to the Secretary, Department of Health and Human Services, and the Director, CDC, concerning the scientific and technical merit of grant and cooperative agreement applications received from academic institutions and other public and private profit and nonprofit organizations, including State and local government agencies, to conduct specific injury research that focuses on prevention and control.

Matters to be Discussed: The meeting will include the review, discussion, and evaluation of individual research cooperative agreement applications submitted in response to Fiscal Year 2009 Requests for Applications related to the following individual research announcement: RFA–EH–09–002 ''Program to Expand State Public Health Laboratory Capacity for Newborn Bloodspot Screening (U01)''.

Agenda items are subject to change as priorities dictate.

Contact Person for More Information: Jane Suen, Dr.P.H., M.S., NCIPC, CDC, 4770 Buford Highway, NE., Mailstop F–62, Atlanta, Georgia 30341, *Telephone:* (770) 488–4281.

The Director, Management Analysis and Services Office, has been delegated the authority to sign **Federal Register** notices pertaining to announcements of meetings and other committee management activities for both CDC and the Agency for Toxic Substances and Disease Registry.

Dated: April 24, 2009.

Elaine L. Baker,

Director, Management Analysis and Services Office, Centers for Disease Control and Prevention.

[FR Doc. E9–10292 Filed 5–4–09; 8:45 am]

BILLING CODE 4163–18–P